

1. CHANGE REQUEST NUMBER:	<b>CHANGE REQUEST Orbital Space Plane (OSP)</b>		2. DATE:	3. NEED DATE:	4. PAGES: 1 of _____
5. TITLE OF CHANGE:					
6. PROGRAM/PROJECT(S) AFFECTED:			7. CENTER(S) AFFECTED:		
8. CHANGE TYPE <input type="checkbox"/> SCOPE <input type="checkbox"/> SCHEDULE <input type="checkbox"/> DOCUMENTATION <input type="checkbox"/> BUDGET CHANGE <input type="checkbox"/> OTHER (SPECIFY): _____					
9. DOCUMENTS AFFECTED:					
10. PURPOSE OF CHANGE:					
11. WBS NUMBER(S) AND TITLE(S):					
12. DESCRIPTION OF CHANGE:					
<b>ORIGINATOR'S INFORMATION</b>					
13. CENTER:	14. MAIL CODE:	15. PHONE NO.	16. E-MAIL ADDRESS:		
17. ORIGINATOR:			18. ORIGINATOR'S SIGNATURE/DATE:		
<b>PROGRAM/PROJECT MANGER/LEAD CONCURRENCE</b>					
19. PROGRAM/PROJECT MANAGER/LEAD:			20. PROGRAM/PROJECT MANAGER/LEAD'S SIGNATURE:		

# CHANGE REQUEST

## Orbital Space Plane (OSP)

21. PAGES:  
\_\_\_\_\_ of \_\_\_\_\_

### BUDGET INFORMATION

22. CHANGE REQUEST NUMBER:

23. COST OF CHANGE(\$K):

24. IMPACTS BY UPN & CENTER PROCUREMENT \$	FY \$K	FY \$K	FY \$K	FY \$K	FY \$K	FY \$K	TOTAL
PROGRAM RESERVES \$K							
PROJECT RESERVES \$K							

25. IMPACTS BY UPN & CENTER NON-PROCUREMENT \$		FY \$K	FY \$K	FY \$K	FY \$K	FY \$K	TOTAL
Total							
CS Salary (Direct)							
CS Travel (Direct)							
Service Pools							
Facility Utilization							
Center G&A							
Total							
CS Salary (Direct)							
CS Travel (Direct)							
Service Pools							
Facility Utilization							
Center G&A							
PROGRAM RESERVES \$K							
PROJECT RESERVES \$K							

26. MANPOWER IMPACTS BY UPN & CENTER	FY FTE		FY FTE		FY FTE		FY FTE		FY FTE		FY FTE		TOTAL FTE	
	CS	CTR	CS	CTR	CS	CTR	CS	CTR	CS	CTR	CS	CTR	CS	CTR

27. TTA(S) NUMBER/TITLE AFFECTED:

28. TRANSACTION WILL AFFECT:

- ☐ PROGRAM GUIDELINES ☐ CENTER GUIDELINES  
☐ PROGRAM OPERATING PLAN

### CONCURRENCE

29. BUSINESS MANAGER:

30. BUSINESS MANAGER'S SIGNATURE/DATE:

### AUTHORIZATION

31. PROJECT MANAGER:

32. PROJECT MANAGER'S SIGNATURE/DATE:

## Orbital Space Plane (OSP) Change Request (CR) Preparation Instructions

MSFC Form 4422 "Orbital Space Plane (OSP) Change Request" (CR) shall be submitted to process changes against technical scope, project guidelines, and center guidelines. The CR contains two pages. Page 1 must be submitted for all changes. Page 2 shall be submitted for changes that affect guidelines (budget or manpower). The continuation sheet, MSFC Form 4422-1, is filled out if the data required does not fit in the allocated space.

- Block 1     Change Request Number: The Release/Receipt desk shall assign all CR numbers for the OSP Program. To obtain CR number contact Sandra Jordan at 256-544-6567. The initial submittal of the CR should not contain a revision number. Any changes made to a CR after initial signed submittal, should be reflected in the CR number by inserting a revision letter following the number (e.g. OSP-PI-0003A)
- Block 2     Date: Date the CR form is prepared or has been revised.
- Block 3     Need Date: Date CR must be presented to the Program Control Board (PCB).
- Block 4     Pages: This should be page 1 of total pages of the CR.
- Block 5     Title Of Change: Enter a brief and concise title, which reflects the intent of the CR.
- Block 6     Program/Project(s) Affected: Project(s) affected by this CR. (An architecture-originated change may affect a project).
- Block 7     Center(s) Affected: Acronym for the center(s) affected by the proposed change (e.g., MSFC, JSC, and KSC).
- Block 8     Change Type: Categories are "Scope", "Schedule", "Documentation", "Budget Change", and "Other (Specify)".
- Block 9     Documents Affected: List the document(s) affected directly or indirectly by the proposed change. All documents listed should include document number, title, and revision level. Indicate if a document is in draft form, i.e., OSP-DOC-009, Work Breakdown Structure (WBS), Rev A, Nov 15, 2001; OSP-OPS-PLAN, Ground Operations Project Plan, Draft, Nov 16, 2001.
- Block 10    Purpose Of Change: Provide a complete and concise statement of the reason for the proposed change.
- Block 11    WBS Number(s) & Title(s): Identify all affected WBS number(s) and title(s) associated with this change.
- Block 12    Description Of Change: Provide a clear and concise description of what the Program Control Board (PCB) is requested to approve. Provide the following areas and include the information requested as it applies to the CR.
- Scope/Tasks: Describe in detail the new/changed scope of work or requirements. For a change to program baseline documents, include a statement of the present requirements, a reference to the paragraph(s) of the baseline document(s) where the requirements are documented, and the precise wording that is proposed to replace the present wording of the requirement (i.e. From/To language). Include the WBS number(s), title(s), and scope/task description affected by this change as well as how these changes tie to product/deliverables. Also provide Technical Task Agreement(s) (TTAs) changes as well.
- Budget: State whether an allocation of Program or Project funds and/or a change to Center guidelines are being requested. Provide rationale why Project funds/reserves are not adequate/appropriate for this change if Program funds are requested. Describe what the budget increase or decrease is based upon and how it was determined.
- Resources: If there is a change in resources other than budget and manpower (i.e., facilities and special equipment), include a Resource Phasing Plan (with changes noted).
- Risk Activity: Identify risks associated with this proposed change. Describe the impact if the proposed change is not approved.
- Schedule: Describe any schedule impacts to Project schedule or Program milestones with respect to this change.
- NOTE: Provide any additional information as CR attachments if necessary. All CR attachments should be referenced in the appropriate block and must be labeled with the CR# and title, attachment #, and prepared date. Each page/sheet of attachment(s) should be numbered as page \_\_\_\_ of \_\_\_\_.
- Block 13    Center: Location originator is assigned to (i.e., MSFC, JSC, KSC, etc.).
- Block 14    Mail Code: Internal organization code (i.e., TD20).
- Block 15    Phone No.: Area code plus 7 digit phone number of originator.
- Block 16    E-mail Address: E-mail address of originator.
- Block 17    Originator: Typed name of person requesting the change.
- Block 18    Originator's Signature/Date: Signature of person requesting the change and date the CR is signed.
- Block 19    Program/Project Manager/Lead: Typed name of Program/Project Manager/Lead concurring and/or sponsoring CR.
- Block 20    Program/Project Manager/Lead's Signature/Date: Signature of Program/Project Manager/Lead and date CR is signed.

## Orbital Space Plane (OSP) Change Request (CR) Preparation Instructions

Block 21 Pages: List page number and total pages.

Block 22 Change Request Number: This is the same number listed on page 1, block 1 of the CR Form.

Block 23 Total Cost of Change: Provide the total full cost of change for all FYs of the CR. Which includes procurement and non-procurement dollars.

Block 24 Impacts By UPN and Center: Enter the UPN (7 digit, i.e., 721-XX-XX) and NASA Center under the column titled "Impacts by UPN & Center", and breakdown costs by Fiscal Year (FY) any and all years affected by the change request. Listed below the column titled "Impacts by UPN & Center" are two lines, one for "Program Reserves \$K" and one for "Project Reserves \$K". If project reserves are utilized, enter your applicable 7-digit UPN. The dollar value previously recorded above by UPN and FY shall be broken down such that the total of each FY equals "0".

### EXAMPLE

24. IMPACTS BY UPN & CENTER	FY \$K	FY \$K	FY \$K	FY \$K	FY \$K	FY \$K	TOTAL
721-35-XX MSFC		-1.2					-1.2
721-55-XX GRC		1.2					1.2
761-32-XX MSFC			5	1.2			6.2
Program Reserves				-8			-5.8
Project Reserves 761-32-XX			-5	-4			-4

Block 25 Impacts by UPN and Center Non-Procurement \$: Enter the UPN (7 digits, i.e., 721-XX-XX) and NASA Center under the first column. Enter the appropriate costs by category listed column two by fiscal year with the items totaling at the top.

### EXAMPLE

25. IMPACTS BY UPN & CENTER NON-PROCUREMENT \$		FY \$K	FY \$K	FY \$K	FY \$K	FY \$K	TOTAL
721-42-XX JSC	Total		200				
	CS Salary (Direct)		100				
	CS Travel (Direct)		10				
	Service Pools		50				
	Facility Utilization						
	Center G&A		40				

Block 26 Manpower Impacts by UPN & Center: Enter the NASA center under the column "Manpower Impacts" and enter the civil services (CS) and contractor (CTR) manpower under the "Full Time Equivalent (FTE)" columns, broken down by Fiscal Year (FY) any and all years affected by the change request. If no manpower values are changed, enter "N/A".

### EXAMPLE

26. MANPOWER IMPACTS BY UPN & CENTER	FY FTE		FY FTE		FY FTE		FY FTE		FY FTE		FY FTE		TOTAL FTE	
	CS	CTR	CS	CTR	CS	CTR	CS	CTR	CS	CTR	CS	CTR	CS	CTR
761-32-XX, MSFC	3.5	-1	1	1									4.5	0

Block 27 TTA(s) Number and Title Affected: List title and number of new or existing Technical Tasks Agreements (TTA) affected by this change.

Block 28 Transaction Will Affect: If this information is available, select any and all blocks that apply. If not available, leave blank.

Block 29 Business Manager: Typed name of individual overseeing Program Planning and Control.

Block 30 Business Manager's Signature/Date: Signature of Business Manager and date CR is signed.

Block 31 Project Manager: Typed name of Project Manager.

Block 32 Project Manager's Signature/Date: Signature of Project Manager and date CR is signed.